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PTO/SB/21 (02-04)

TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/600,027
	Filing Date	June 19, 2003
	First Named Inventor	ODRICH, MARC
	Art Unit	3739
	Examiner Name	Unassigned
	Attorney Docket Number	018158-011140US
Total Number of Pages in This Submission		

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Supplemental Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Postcard PTO/SB/08A & PTO/SB/08B 13 Reference Copies
<div>Remarks</div>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Townsend and Townsend and Crew LLP Mark D. Barrish Reg. No. 36,443
Signature	
Date	July 12, 2004

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Typed or printed name	Edward Masinas		
Signature		Date	July 13, 2004

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PATENT
Attorney Docket No.: 018158-011140US
Client Reference No.: VX-1073-C1

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

On

7-13-04



TOWNSEND and TOWNSEND and CREW LLP

By:

Edward Masinas

Edward Masinas

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

ODRICH, Marc et al.

Application No.: 10/600,027

Filed: June 19, 2003

For: METHOD AND SYSTEMS FOR
LASER TREATMENT OF
PRESBYOPIA USING OFFSET
IMAGING

Examiner: Unassigned

Art Unit: 3739

SUPPLEMENTAL INFORMATION
DISCLOSURE STATEMENT UNDER 37
CFR §1.97 and §1.98

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

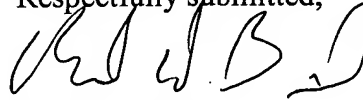
Sir:

The references cited on attached form PTO/SB/08A and PTO/SB/08B are being called to the attention of the Examiner. Copies of the references are enclosed. It is respectfully requested that the cited references be expressly considered during the prosecution of this application, and the references be made of record therein and appear among the "references cited" on any patent to issue therefrom.

As provided for by 37 CFR 1.97(g) and (h), no inference should be made that the information and references cited are prior art merely because they are in this statement and no representation is being made that a search has been conducted or that this statement encompasses all the possible relevant information.

Applicant believes that no fee is required for submission of this statement.
However, if a fee is required, the Commissioner is authorized to deduct such fee from the undersigned's Deposit Account No. 20-1430. Please deduct any additional fees from, or credit any overpayment to, the above-noted Deposit Account.

Respectfully submitted,



Mark D. Barrish
Reg. No. 36,443

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60253707 v1

(use as many sheets as necessary)

Sheet 1 of 2

Application Number	10/600,027
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Filing Date	June 19, 2003
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First Named Inventor	ODRICH, MARC
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Art Unit	3739
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Examiner Name	Unassigned
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Attorney Docket Number	018158-011140US
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[illegible][illegible]Date
Considered

*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. ¹ Applicant's unique citation designation number (optional). ² Kind Codes of U.S. Patent Documents at www.uspto.gov or MPEP 901.04. ³ Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). ⁴ For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. ⁵ Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST. 16 if possible. ⁶ Applicant is to place a check mark here if English language Translation is attached.

60253707 v1

Substitute for form 1449B/PTO INFORMATION DISCLOSURE STATEMENT BY APPLICANT (use as many sheets as necessary)				Complete if Known	
				Application Number	10/600,027
				Filing Date	June 19, 2003
				First Named Inventor	ODRICH, MARC
				Art Unit	3739
				Examiner Name	Unassigned
Sheet	2	of	2	Attorney Docket Number	018158-011140US

NON PATENT LITERATURE DOCUMENTS			
Examiner Initials *	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T ²
	11	Loewenfeld, Irene, E., <i>The Pupil: Anatomy, Physiology and Clinical Applications</i> , Volume 1, (©1993) Wayne State University Press, Detroit, MI, pp. 296, 301-304.	
	12	Moreira et al., "Multifocal Corneal Topographic Changes with Excimer Laser Photorefractive Keratectomy" <i>Arch. Ophthalmol.</i> (1992) 110:994-999.	
	13	Vinciguerra et al., "Excimer Laser Photorefractive Keratectomy for Presbyopia: 24-month Follow-up in Three Eyes" <i>Journal of Refractive Surgery</i> (1998) 14:31-31.	

Examiner Signature		Date Considered	
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¹ Applicant's unique citation designation number (optional). ² Applicant is to place a check mark here if English language Translation is attached.